



# New York State

# 2003

## Managed Care Plan Performance

A Report on Quality, Access to Care,  
and Consumer Satisfaction



State of New York  
George E. Pataki, Governor

Department of Health  
Antonia C. Novello, M.D., M.P.H., Dr.P.H., Commissioner

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## A MESSAGE FROM THE COMMISSIONER

Governor Pataki and I remain committed to improving quality and access to affordable health care in New York State. This report contains information about managed care health plans in New York State obtained from the Quality Assurance Reporting Requirements (QARR). The information presented in this report serves to inform and educate health care consumers, providers and insurers as they make important decisions for themselves, their families, and their employees. Accountability through public reporting of health care quality results is fundamental to our overall commitment to improved access to health care information for all New Yorkers.

This report contains performance results from commercial, Medicaid, and Child Health Plus health plans. This information is also available on our website (<http://www.health.state.ny.us>) both in this format, and in an electronic version (eQARR) that allows for regional comparisons of measures chosen by the viewer.

We are pleased that as a result of our on-going collaboration with health plans, and health plans with their clinicians and enrollees, we continue to see improvements in preventive services for women and children enrolled in Medicaid managed care. In addition, we see gains in the treatment of chronic diseases such as asthma and diabetes. The performance of our health plans in New York continues to surpass many available national benchmarks for similar health plans.

Quality improvement is a continuous process and we pledge to accelerate our efforts with all health plans to provide support and technical assistance in our mutual effort to make New York residents the healthiest in the nation.

If you have any questions or comments regarding this report you may contact the Office of Managed Care, Bureau of Quality Management and Outcomes Research, at (518) 486-6074.

  
Antonia C. Novello, M.D., M.P.H., Dr. P.H.



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INTRODUCTION

Managed care plans provide a wide range of health services to millions of New Yorkers. Choosing a health plan that meets your needs and the needs of your family is an important decision. This report is designed to help you make an informed decision by providing you with clear, easy-to-read information on health plan performance with respect to primary and preventive health visits, access to health care, behavioral health and medical management of select chronic diseases.

The Health Plan Profiles section of this report provides information on the health plans currently enrolling members in New York State, including the regions of the state they currently serve, the types of insurance they accept, how to contact them and other important information. There are important things to consider when choosing a managed care plan. Does your current doctor participate in the plan? Does the plan enroll members in your county of residence? Does the plan offer special services that will enhance the health of your family? How much will coverage cost? Talk to friends, family, co-workers and health care providers before making your choice.

QUALITY MEASUREMENT IN  
NEW YORK STATE

As a way of monitoring plan performance and improving the quality of care provided to New York State residents, the New York State Department of Health implemented a public reporting system in 1994 called the Quality Assurance Reporting Requirements (QARR). QARR is largely based on measures published by the National Committee for Quality Assurance (NCQA) Health Plan Employer Data and Information Set (HEDIS®) and has been collected annually for managed care plans since

the 1994 measurement year. The 2003 Report on New York State Managed Care Plan Performance is the ninth annual report on managed care performance in New York State.

Type of Insurance

Information on three types of insurance is included in this report: commercial, Medicaid and Child Health Plus. Individuals whose employers pay for their insurance are included in the category, “commercial.” People in government-sponsored programs are represented in Medicaid (which includes Family Health Plus enrollees age 19 and older) or Child Health Plus (enrollees up to the age of 19). Child Health Plus is New York State’s version of the federal State Children’s Health Insurance Program.

Who Reports?

Managed care plans in operation during the entire 2002 calendar year were required to report QARR data. This report contains information on 40 health plans. 20 plans reported on commercial enrollees; 28 plans reported on Medicaid enrollees and 27 plans reported on Child Health Plus enrollees. Please note when you are reviewing this report that not all health plans serve commercial, Medicaid and/or Child Health Plus enrollees.

ABOUT THIS REPORT

This report contains the most recent information from commercial satisfaction surveys, standardized quality of care measures and the providers in the plans’ networks. The health plans have their information validated by an independent auditor prior to sending it to the Department. Only valid information is published in this report.

What is in this report?

Quality performance data in this report is divided into the following six areas:

- Provider Network
- Child and Adolescent Care
- Women’s Health
- Adults Living with Illness
- Behavioral Health
- Access and Service

The measures in each section allow you to compare the health plans performance to the statewide average.

Information from the commercial satisfaction survey is included in the Provider Network, Adults Living with Illness and Access and Service sections.

Performance Rating

Each section contains groups of quality of care performance measures with results for each plan and the statewide average. Symbols are provided to indicate whether the plan performed better (▲) or worse (▼) than the statewide average.

Performance Measure Reporting

The Department does not require health plans to collect all measures every year. Therefore, the prior year’s information for some measures is not available. Performance measures not collected for commercial enrollees during 2002, but reported for Medicaid and CHPlus enrollees (if applicable), include:

- Well-Child Visits First 15 Months
- Well-Child Visits Age 3-6 Years
- Adolescent Well-Care Visits
- Annual Dental Visit
- Frequency of Ongoing Prenatal Care
- Timeliness of Prenatal Care
- Postpartum Care.

In addition, the Medicaid consumer satisfaction survey is conducted by the Department on a biennial basis. The last year that consumer satisfaction results for Medicaid-enrollees can be found is in the 2002 Report on New York State Plan Performance found on the DOH website at the following link:

[http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2002/qarr2002.pdf](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2002/qarr2002.pdf)

Trends and Averages

The last page of each section contains a graph showing New York’s performance over time and comparable national benchmarks (if available) for the performance measures published in that section.

When available, commercial and Medicaid benchmarks are obtained from the National Committee for Quality Assurance’s (NCQA) State Of Health Care Quality Report, available online at <http://www.ncqa.org/sohc2002/>.

There are currently no available national benchmarks for Child Health Plus.

Regional Rates

The last section of this report is a table indicating regional averages for each of the performance measures. Rates for Long Island (LI), New York City (NYC), Hudson Valley (HV), Northeast (NE), Central (CEN) and Western (WST) New York are presented, along with the total of all counties outside of New York City (ROS). For more information on what counties are in each of these regions, refer to the Measure Description table in the Plan Profiles section of this report (Section 2).

OTHER MANAGED CARE REPORTS AND WEBSITES

Department of Health

eQARR

As in previous years, annual quality results are also available on the department’s website as an interactive report card (eQARR) for health care consumers. Commercial, Medicaid and Child Health Plus data are available on a regional basis, and whether a health plan scored significantly above or below the regional average is presented. eQARR can be found at the following direct link: <http://www.health.state.ny.us/nysdoh/eqarr/nmain.htm>.

Consumer Guides

The department produces consumer guides for Medicaid enrollees. The guides contain adult and child quality, access to care and satisfaction with care ratings. Six regions are available for the 2003 versions: New York City, Long Island, Western New York, Northeast New York, Central New York, and the Hudson Valley. The New York City guide is also available in Spanish. Guides can be obtained free of charge at the department’s website or by calling the Office of Managed Care at (518) 486-6074.

NYS Managed Care Report-Supplement

The 2003 NYS Managed Care Report-Supplement contains additional information for managed care plans, providers, purchasers and consumers and is available on the Department’s website at [http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2003/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2003/supplement_intro.htm). This supplemental report contains data on Prenatal and Postnatal Care (including technical notes on data collection and risk-adjustment models used in the prenatal care analyses), Provider Network and Use of Services.

Other

*The New York State Insurance Department Consumer Guide to Health Insurers*

For commercial managed care plans, selected QARR Effectiveness of Care, Satisfaction with the Experience of Care, and Provider Network data are included in the State Insurance Department's (SID) publication, New York Consumer Guide to Health Insurers. The Guide also includes general information on health insurance and managed care, as well as data from SID on complaints and payment methodologies. The SID web site is located at: <http://www.ins.state.ny.us>.

*Health Accountability Foundation New York State HMO Report Card*

For commercial managed care plans, selected QARR Effectiveness of Care and Satisfaction data are also included in a report published by the New York State Health Accountability Foundation (HAF) entitled, New York State HMO Report Card. The Report Card also includes Access to Care information from QARR. The HAF web site is: <http://www.nyshaf.org>.

FEEDBACK

We welcome suggestions and comments on this publication. Please contact us at:

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SECTION 2

Information on Health Plans Serving New York State Residents





PLAN PROFILES

This plan profile section provides an overview of each managed care plan operating in New York State during 2002. The profiles include the following information:

Column Heading	Description
Type of Insurance	Whether a plan enrolls members under private insurance (CO), Medicaid managed care (MA), Child Health Plus (CHP) or Family Health Plus (FHP) is indicated by the following symbol: † .
Plan Service Areas	The 62 counties of NYS are divided into six regional plan service areas. Managed care organizations are certified to operate in specific counties in New York State. Please contact the health plans in your area to find out if they are currently enrolling in your county of residence.
Long Island (LI)	Nassau, Suffolk.
New York City (NYC)	Bronx, Kings (Brooklyn), New York (Manhattan), Queens, Richmond (Staten Island).
Hudson Valley (HV)	Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester.
Northeast (NE)	Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington.
Central (CEN)	Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tioga, Tompkins.
Western (WST)	Allegany, Cattaraugus, Chautauqua, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Wyoming, Yates.
Member Services/ Website	A toll-free member services number, and if available, the health plan’s main website URL.
NCQA Accreditation	The National Committee for Quality Assurance’s (NCQA) comprehensive accreditation process is conducted by a team of physicians and managed care experts. The accreditation level granted by NCQA is contained in this column. For more information about the accreditation process and the degrees of certification, visit NCQA’s web site at <a href="http://www.ncqa.org">www.ncqa.org</a> .
2002 Enrollment	The total number enrolled in the health plan as of December 31, 2002.
Percent Change from 2001	The percent change in total enrollment between December 31, 2001 and December 31, 2002.

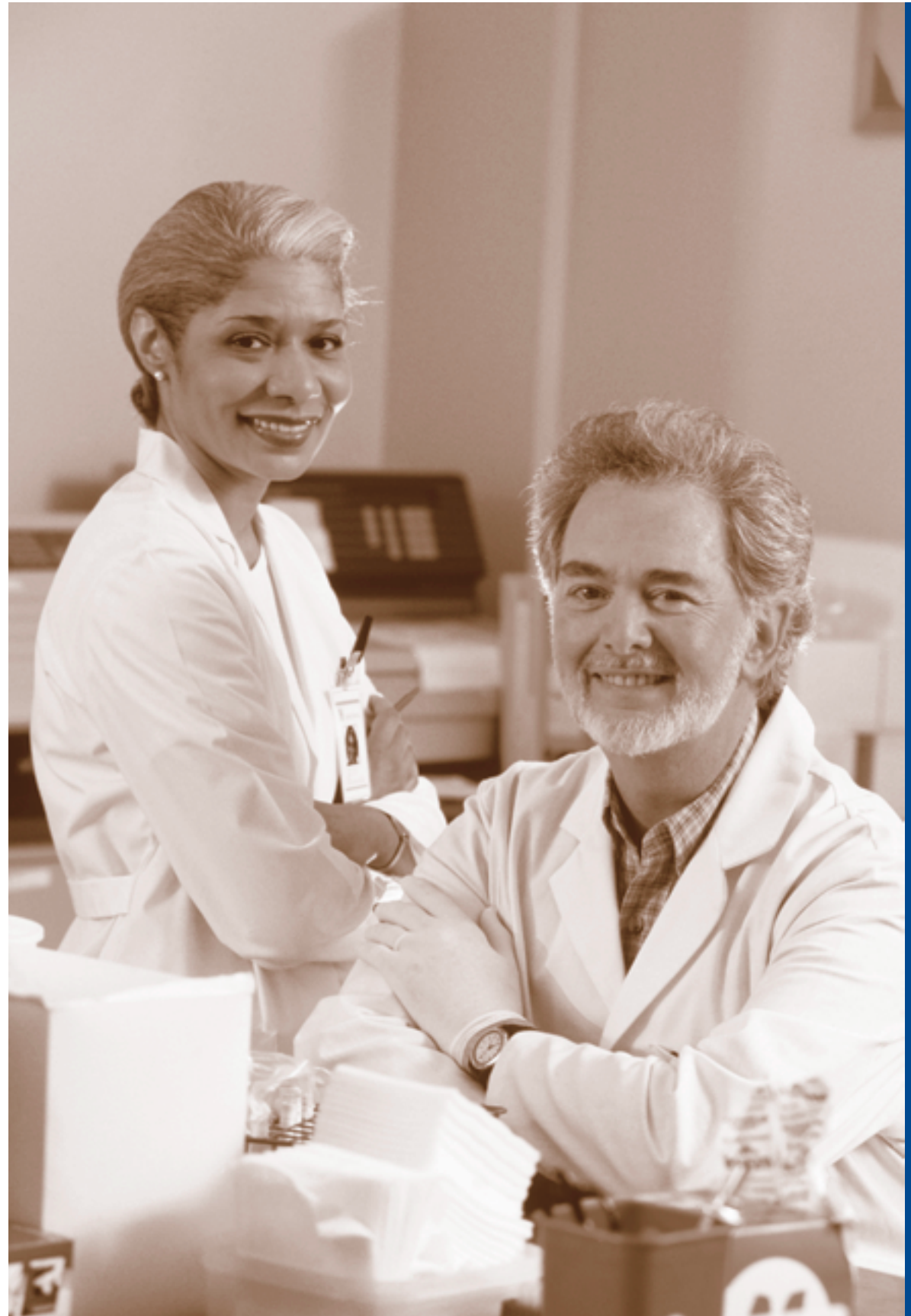
PLAN PROFILES

HEALTH PLAN	TYPE OF INSURANCE				PLAN SERVICE AREAS*						Member Services	Website	NCQA Accreditation**	2002 Enrollment	+/- Change from 2001
	CO	MA	CHP	FHP	LI	NYC	HV	NE	CEN	WST					
ABC Health Plan		†	†	†		●					1-800-298-2420	www.abchealthplan.org		9,634	+79%
Aetna Health	†				●	●	●		●		1-800-872-3862	www.aetna.com	Excellent	471,583	-37%
Affinity Health Plan		†	†	†	●	●	●				1-866-247-5678	www.affinityplan.org		142,493	+44%
AmeriChoice		†	†	†		●					1-800-493-4647	www.americhoice.com		81,949	+37%
Blue Choice	†		†					●	●	●	1-800-338-4995	www.excellus.com	Excellent	463,103	-16%
Blue Choice Option		†		†					●	●	1-800-338-4995	www.excellus.com	Excellent	55,999	+37%
BSNENY-HMO	†	†	†	†				●			1-866-231-0847	www.bsneny.com	C-Excellent; M-Commendable	105,623	+20%
Buffalo Community Health		†	†	†						●	1-800-683-3781	www.univerahealthcare.com/wny/plusmed.html		13,112	+18%
CarePlus Health Plan		†	†	†		●	●				1-877-692-8669	www.careplushealth.com		74,053	+52%
CDPHP	†	†	†	†			●	●	●		1-800-777-2273	www.cdphp.com	Excellent	317,022	+ 5%
CenterCare		†	†	†		●					1-800-545-0571	www.centercare.org		71,005	+40%
Cigna	†				●	●	●				1-800-832-3211	www.cigna.com/consumer/services/healthcare	Commendable	76,797	+38%
Community Blue	†	†	†	†					●	●	1-866-231-0847	www.bcbswny.com	Excellent	341,702	+ 2%
Community Choice		†	†	†		●	●				1-800-224-7990			17,304	+30%
Community Premier Plus		†	†	†		●					1-800-867-5885	www.royalhc.com		26,620	+92%
Empire	†		†		●	●	●	●			1-800-431-1914	www.empireblue.com	Excellent	387,700	- 4%
Fidelis Care New York		†	†	†	●	●	●	●	●	●	1-888-343-3547	www.fideliscare.org		177,331	+42%
GHI			†	†		●	●	●	●	●	1-800-652-1332	www.ghi.com		8,935	+86%
GHI HMO	†			†	●	●	●	●	●		1-877-244-4466	www.ghihmo.com	New Health Plan Accreditation	33,618	+13%
Health Net	†				●	●	●				1-888-747-4090	www.phshealthplans.com		199,832	- 6%
Health Plus		†	†	†		●					1-800-300-8181	www.healthplus-ny.org		175,034	+44%
HealthFirst		†	†	†	●	●					1-800-905-5445	www.healthfirstny.com		155,905	+73%
HealthSource/HHP		†	†	†			●				1-800-339-4557	www.hshhp.org		42,068	+21%
HIP	†	†	†	†	●	●	●				1-800-447-8255	www.hipusa.com	Commendable	841,416	+10%
Independent Health	†	†								●	1-800-501-3439	www.independenthealth.com	Excellent	333,885	- 4%
Managed Health, Inc.	†				●	●					1-800-905-5445			22,516	+27%
MDNY	†				●						1-800-909-1950	www.mdnyhealthcare.org		62,444	+13%
MetroPlus		†	†	†		●					1-800-475-6387	www.ci.nyc.ny.us/html/hhc/html/metroplus.html		134,492	+71%
MVP	†						●	●	●		1-888-687-6277	www.mvphealthcare.com	Excellent	345,785	- 6%
Neighborhood Health Providers		†	†	†		●					1-800-826-6240	www.getnhp.com		75,680	+28%
New York-Presbyterian CHP		†	†	†		●					1-800-261-4649	www.nyp.org/healthplan		32,736	+128%
Oxford	†				●	●	●				1-800-444-6222	www.oxhp.com	Excellent	1,029,922	- 4%
Partners in Health		†		†		●					1-800-652-1332	www.stbarnabashospital.org/PIH		21,770	+77%
Preferred Care	†	†								●	1-800-950-3224	www.preferredcare.org	C-Excellent	148,349	- 4%
Suffolk Health Plan		†	†		●						1-800-763-9132			14,995	+21%
Total Care		†	†	†					●		1-800-223-7242			18,409	+24%
UnitedHealthcare of New York	†	†	†	†	●	●	●		●		1-888-617-8979	www.unitedhealthcare.com	C-Commendable	154,683	+17%
Univera HealthCare	†									●	1-800-223-4780	www.univerahealthcare.com	Commendable	158,670	-42%
Upstate HMO	†		†					●	●	●	1-800-317-5658	www.excellus.com	Excellent	88,922	-25%
Vytra Health Plans	†	†			●	●					1-800-406-0806	www.vytra.com		99,447	+10%
WellCare		†	†	†		●	●	●	●		1-800-288-5441			43,561	+38%

\* Plans may not participate in all counties in regions indicated.  
\*\* Data Source: NCQA website: <http://hprc.ncqa.org/index.asp>  
NCQA Accreditation Status as of 6/30/2003.

Not every plan may be accepting new enrollment. Please call the plan Member Services number to make sure.

Provider Network





PROVIDER NETWORK

This section of the report is designed to provide information on a health plan’s provider network and how consumers feel about the care they receive by network providers.

Also provided in this section are board certification rates for three types of providers. Various boards certify physicians in their area of specialization based on education, experience and clinical and/or written testing.

**Three measures in this section:**  
1)How Often Providers Communicate Well,  
2) Satisfaction With Personal Doctor or Nurse, and,  
3) Satisfaction with Specialist are collected using a national survey methodology called Consumer Assessment of Health Plans Survey, (CAHPS).

CAHPS is collected every year for commercial enrollees. The Department sponsors a consumer

satisfaction survey for Medicaid enrollees every two years. The most recent data is from 2001 and is published in EQARR 2002 and the 2002 New York State Managed Care Plan Performance Report. Copies are available by calling the Department at (518)486-6074 or visiting the Department’s website at [www.health.state.ny.us](http://www.health.state.ny.us) and looking under “Information for Consumers.”

Measure	Description (Type of Insurance)
Board Certification	The percentage of board-certified physicians in each of the following three specialty fields: primary care, obstetrics and gynecology, and pediatric practitioner specialists. (C, M)
How Often Providers Communicated Well	The proportion of members that responded “usually” or “always” when asked how often their doctor or health care provider listened to them carefully, explained things in a way they could understand, showed respect for what they had to say and spent enough time with them. (C)
Satisfaction with Personal Doctor or Nurse	The proportion of members responding 8, 9 or 10 (on a scale of 0 to 10 where 0 is the worst personal doctor or nurse possible and 10 is the best personal doctor or nurse possible) when asked “How would you rate your personal doctor or nurse now?” (C)
Satisfaction with Specialist	The proportion of members responding 8,9 or 10 (on a scale of 0 to 10 where 0 is the worst specialist possible and 10 is the best specialist possible) when asked “How would you rate your specialist?” (C)

COMMERCIAL HEALTH PLAN PERFORMANCE

3

HEALTH PLAN	Board Certified Primary Care	Board Certified OB/GYN	Board Certified Pediatric Specialist	Provider Communication	Personal Doctor or Nurse	Satisfaction with Specialist
Aetna	84 ▼	84 ▲	72 ▼	88 ▼	76	78
Blue Choice	88 ▲	84 ▲	75	94 ▲▲	76	79
BSNENY-HMO	86	82	69	94 ▲▲	78	82
CDPHP	78 ▼	83 ▲▲	65 ▼	94 ▲▲	80	84
Cigna	82 ▼	72 ▼	80	86 ▼	64 ▼	63 ▼
Community Blue	80 ▼	82	68 ▼	93	73	82
Empire	85	76	75 ▼	91	76	78
GHI HMO	86	81	85	90 ▼	69 ▼	75
Health Net	83 ▼	77	86 ▲▲	92	81 ▲	80
HIP	79 ▼	57 ▼	75 ▼	89 ▼	71	73
Independent Health	77 ▼	76	75	94 ▲▲	81	82
Managed Health, Inc.	84	74	84	—	—	—
MDNY	89 ▲▲	86 ▲▲	79	92	72	71 ▼
MVP	90 ▲	80	78	95 ▲▲	81	81 ▲
Oxford	90 ▲▲	78	80	90	75	84 ▲
Preferred Care	91 ▲▲	91 ▲▲	96 ▲▲	93 ▲▲	77	81
UnitedHealthCare of New York	91 ▲▲	83 ▲▲	79	88 ▼	72	70
Univera HealthCare	84	80	64 ▼	91	76	80
Upstate HMO	88 ▲	80	77	93	81	84
Vytra Health Plans	90 ▲▲	86 ▲▲	85	93	76	78
Statewide Average	85	77	81	92	76	79

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- NV Plan submitted invalid data
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MEDICAID HEALTH PLAN PERFORMANCE

3

HEALTH PLAN	Board Certified Primary Care	Board Certified OB/GYN	Board Certified Pediatric Specialist
ABC Health Plan	89▲▲	71	72
Affinity Health Plan	80▼	74	86▲▲
AmeriChoice	82	74	70▼
Blue Choice Option	89▲	83▲	75
BSNENY-HMO	91▲	88▲	—
Buffalo Community Health/PlusMed	85	79	64▼
CarePlus Health Plan	85	76	84
CDPHP	78▼	82▲▲	73
CenterCare	86▲▲	73	95▲▲
Community Blue	81▼	82▲	65▼
Community Choice	80	69	94▲▲
Community Premier Plus	85	90▲▲	88▲▲
Fidelis Care New York	84	76	94▲▲
Health Plus	77▼	66▼	76▼
HealthFirst	83	73	83
HealthSource/HHP	77▼	74	80
HIP	81▼	56▼	75▼
Independent Health/MediSource	77▼	76	76
MetroPlus	80▼	69	77
Neighborhood Health Providers	80▼	61▼	79
New York-Presbyterian CHP	85	78	87
Partners in Health	86	—	91
Preferred Care	90▲▲	90▲▲	96▲▲
Suffolk Health Plan	65▼	62	85
Total Care	93▲▲	75	95▲▲
UnitedHealthCare of New York	90▲▲	83▲▲	79
Vytra Health Plans	90▲▲	86▲▲	85
WellCare	82	72	73▼
Statewide Average	84	73	82

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- NV Plan submitted invalid data
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.



Looking for more information on health plan networks?

The following measures are published in the 2003 Report on Managed Care Performance-Supplement at the direct link:  
[http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2003/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2003/supplement_intro.htm)

- Provider Turnover Rates (Primary Care, OB/GYN, Chemical Dependency, Mental Health, Dentists)
- Practitioner Compensation Methods (Last reported in the 2002 Report on Managed Care Performance-Supplement [http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2002/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2002/supplement_intro.htm))





MEASURE DESCRIPTIONS

To ensure children lead healthy lives and reach their full potential, all children need primary and preventive care visits within recommended time frames. Children should receive the recommended series of vaccinations for their age. A blood lead test should be conducted before their second birthday to screen for possible lead poisoning. Children should also receive an annual dental visit.



Children with chronic health conditions, such as asthma, should receive proper medical management for their condition. This section contains information on whether children are receiving appropriate medications for asthma.

Measure	Description (Type of Insurance)
Childhood Immunization Status (3 or more Hepatitis B)	The HEDIS 2003 specifications for fully immunized consisted of the following vaccines: 4 Diptheria/Tetanus/Pertussis, 3 Polio, 1 Measles/Mumps/Rubella, 3 H influenza type B, and 3 Hepatitis B. However, there was a nationwide shortage of many of the vaccines during 2002 (the year upon which this data are based). The percentage of two-year olds that received 3 Hepatitis B is used to evaluate childhood immunizations for 2002 since there was no shortage for that vaccine. (C, M, CHP)
Lead Testing	The percent of two-year olds that had their blood tested for lead poisoning. (C, M, CHP)
Well-Child & Preventive Care Visits in the First 15 Months of Life (5+ Visits)	Percent of children who had five or more well-child and preventive health visits in their first 15 months of life. The Medicaid percentages were calculated for the plans by the NYSDOH using data from the Medicaid Encounter Data System (MEDS) and include Child/Teen Health Plan visits. As a result, the Medicaid rates are not comparable to Child Health Plus rates. Child Health Plus rates were calculated by the plans using slightly different criteria. (M, CHP)
Well-Child & Preventive Care Visit in the 3rd, 4th, 5th or 6th Year of Life	Percent of children between the ages of three and six years who had a well-child and preventive health visit. The Medicaid percentages were calculated for the plans by the NYSDOH using data from the NYSDOH using data from the MEDS and include Child/Teen Health Plan visits. As a result, the Medicaid rates are not comparable to Child Health Plus rates. Child Health Plus rates were calculated by the plans using slightly different criteria (M, CHP)
Adolescent Well-Care and Preventive Visits	Percent of adolescents who had a well-care, preventive care or OB/GYN visit. The Medicaid percentages were calculated for the plans by the NYSDOH using data from MEDS and include Child/ Teen Health Plan visits. As a result, the Medicaid rates are not comparable to Child Health Plus rates. Child Health Plus rates were calculated by the plans using slightly different criteria. (M, CHP)
Use of Appropriate Medications for People With Asthma	Percent of children ages 5 to 17 years with persistent asthma who received appropriate medications to control their condition. For Child Health Plus, the reporting age group is 5 to 18 years. (C, M, CHP)
Annual Dental Visit	Percent of children and adolescents ages 4 through 21 years who had at least one dental visit within the last year. Not all Medicaid plans offer dental as part of their benefit package, and enrollees have access to dental services through fee-for-service. (M, CHP)

COMMERCIAL HEALTH PLAN PERFORMANCE

4

HEALTH PLAN	Childhood Immunization (>3 HepB)	Lead Testing	Use of Appropriate Medications for People with Asthma (Ages 5-17)
Aetna	79▼	60▼	60▼
Blue Choice	93▲	65	72▲▲
BSNENY-HMO	93▲	63	76▲▲
CDPHP	94▲	67	71▲
Cigna	85	55▼	53▼
Community Blue	96▲	73▲	63
Empire	83▼	61▼	63
GHI HMO	82▼	57▼	65
Health Net	80▼	71	66
HIP	86	73▲	55▼
Independent Health	96▲	77▲	63
Managed Health, Inc.	—	—	—
MDNY	83▼	40▼	72▲
MVP	91▲	67	73▲▲
Oxford	86	65	65
Preferred Care	89	65	64
UnitedHealthCare of New York	65▼	64	68
Univera HealthCare	89	80▲	66
Upstate HMO	90	74▲	72
Vytra Health Plans	85	52▼	65
Statewide Average	87	66	65

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MEDICAID HEALTH PLAN PERFORMANCE

4

HEALTH PLAN	Childhood Immunization (>3 HepB)	Lead Testing	Use of Appropriate Medications for People with Asthma (Ages 5-17)	Annual Dental Visit
ABC Health Plan	49▼	62▼	45	20▼
Affinity Health Plan	80	79▲	59	31▼
AmeriChoice	73▼	77	57	47▲▲
Blue Choice Option	92▲▲	80▲▲	59	NA
BSNENY-HMO	92▲▲	65	—	NA
Buffalo Community Health/PlusMed	82	88▲▲	64	NA
CarePlus Health Plan	73	73	61	32▼
CDPHP	93▲▲	71	60	NA
CenterCare	63▼	70▼	60	NA
Community Blue	87▲▲	68▼	61	NA
Community Choice	72	64▼	NV	36
Community Premier Plus	72▼	86▲▲	58	NA
Fidelis Care New York	86▲	78	62▲	45▲▲
Health Plus	80	76	61	NA
HealthFirst	73	68▼	61	29▼
HealthSource/HHP	77	79▲	57	45▲▲
HIP	73	67▼	62▲	29▼
Independent Health/MediSource	87▲▲	76	62	NA
MetroPlus	77	86▲▲	59	NA
Neighborhood Health Providers	68▼	76	57	25▼
New York-Presbyterian CHP	86▲	82▲▲	62	NA
Partners in Health	57▼	76	34▼	43▲▲
Preferred Care	92▲	81▲	65▲	NA
Suffolk Health Plan	87▲	86▲▲	61	NA
Total Care	85▲	78	58	NA
UnitedHealthCare of New York	73▼	63▼	21▼	NA
Vytra Health Plans	71▼	62▼	61	42▲▲
WellCare	74	56▼	26▼	NA
Statewide Average	78	74	58	35

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly better than statewide average in 2002
- ▼ Significantly worse than the statewide average in 2002
- Sample size too small to report
- NA Not applicable. Plan does not provide dental coverage.
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

MEDICAID HEALTH PLAN PERFORMANCE

4

HEALTH PLAN	Well-Child & Preventive Care Visits in the First 15 Months of Life	Well-Child & Preventive Care Visits During the 3rd, 4th, 5th and 6th Years	Adolescent Well-Care & Preventive Visits
ABC Health Plan	44▼	57▼	55▼
Affinity Health Plan	60▼	74▼	63▼
AmeriChoice	77▲▲	88▲▲	78▲▲
Blue Choice Option	66▼	79▼	71
BSNENY-HMO	74	86▲	80▲
Buffalo Community Health/PlusMed	73	88▲▲	81▲▲
CarePlus Health Plan	75	82	70
CDPHP	90▲▲	85▲▲	79▲▲
CenterCare	65▼	76▼	71
Community Blue	86▲▲	86▲▲	80▲▲
Community Choice	53▼	76▼	61▼
Community Premier Plus	62▼	84▲	76▲
Fidelis Care New York	81▲▲	83▲	75▲▲
Health Plus	76▲▲	82	70▼
HealthFirst	65▼	82▲	70▼
HealthSource/HHP	79▲	86▲▲	74▲▲
HIP	67▼	84▲	71
Independent Health/MediSource	79▲▲	85▲▲	78▲▲
MetroPlus	59▼	77▼	67▼
Neighborhood Health Providers	70	77▼	63▼
New York-Presbyterian CHP	62▼	81	69▼
Partners in Health	60▼	73▼	65▼
Preferred Care	85▲▲	81	73
Suffolk Health Plan	75	80	71
Total Care	71	82	77▲▲
UnitedHealthCare of New York	59▼	75▼	68▼
Vytra Health Plans	89▲▲	88▲▲	79▲▲
WellCare	71	84▲	79▲
Statewide Average	72	81	71

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

CHILD HEALTH PLUS PLAN PERFORMANCE

4

HEALTH PLAN	Childhood Immunization (>3 HepB)	Lead Testing	Use of Appropriate Medications for People with Asthma (Ages 5-18)	Annual Dental Visit
ABC Health Plan	—	—	—	24 ▼
Affinity Health Plan	66 ▼	66	42 ▼	37 ▼
AmeriChoice	—	—	—	46
Blue Choice	94 ▲▲	67	74 ▲▲	59 ▲▲
BSNENY-HMO	95 ▲▲	65	71 ▲▲	36 ▼
Buffalo Community Health	83	81 ▲▲	64	47 ▲▲
CarePlus Health Plan	68 ▼	67	50 ▼	39 ▼
CDPHP	93 ▲▲	69	71 ▲▲	49 ▲▲
CenterCare	69	72	54 ▼	37 ▼
Community Blue	89 ▲▲	70	67	50 ▲▲
Community Choice	66 ▼	71	NV	40
Community Premier Plus	63	83 ▲	—	36 ▼
Empire	86 ▲▲	65	65	49 ▲▲
Fidelis Care New York	81	69	64	45 ▲▲
GHI	—	—	—	50 ▲
Health Plus	78	71	56 ▼	34 ▼
HealthFirst	71 ▼	62 ▼	65	35 ▼
HealthSource/HHP	78	79 ▲	63	54 ▲▲
HIP	82	65	69 ▲	36 ▼
MetroPlus	74	85 ▲▲	54	34 ▼
Neighborhood Health Providers	68 ▼	70	58	36 ▼
New York-Presbyterian CHP	97 ▲	87 ▲▲	—	27 ▼
Suffolk Health Plan	68	68	—	52 ▲▲
Total Care	93 ▲▲	70	56	40
UnitedHealthCare of New York	74	62 ▼	70 ▲▲	32 ▼
Upstate HMO	89 ▲▲	71	68 ▲	42 ▲▲
WellCare	65 ▼	47 ▼	54	21 ▼
Statewide Average	78	68	63	41

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.



# CHILD HEALTH PLUS PLAN PERFORMANCE

Section

4

HEALTH PLAN	Well-Child & Preventive Health Visits in the First 15 Months of Life	Well-Child & Preventive Care Visits During the 3rd, 4th, 5th and 6th Years	Adolescent Well-Care & Preventive Visits
ABC Health Plan	—	51 ▼	36 ▼
Affinity Health Plan	52 ▼	68 ▼	45 ▼
AmeriChoice	—	96 ▲	67 ▲
Blue Choice	84 ▲▲	82 ▲▲	60 ▲▲
BSNENY-HMO	—	76	50 ▼
Buffalo Community Health	—	81 ▲▲	55
CarePlus Health Plan	70	77	63 ▲▲
CDPHP	94 ▲▲	83 ▲▲	58 ▲▲
CenterCare	—	73	56
Community Blue	—	77	51 ▼
Community Choice	—	83 ▲	58 ▲
Community Premier Plus	—	71	48 ▼
Empire	71 ▲	73 ▼	50 ▼
Fidelis Care New York	78 ▲▲	74	49
GHI	—	69 ▼	49
Health Plus	67	79 ▲	57
HealthFirst	54 ▼	76	58 ▲
HealthSource/HHP	—	76	49
HIP	76 ▲	79 ▲	63 ▲▲
MetroPlus	—	79 ▲▲	56
Neighborhood Health Providers	58	72	49
New York-Presbyterian CHP	—	78	61 ▲▲
Suffolk Health Plan	—	69 ▼	47 ▼
Total Care	—	75	51
UnitedHealthCare of New York	73	74	48 ▼
Upstate HMO	76	71 ▼	45 ▼
WellCare	59	55 ▼	38 ▼
Statewide Average	67	75	53

## LEGEND

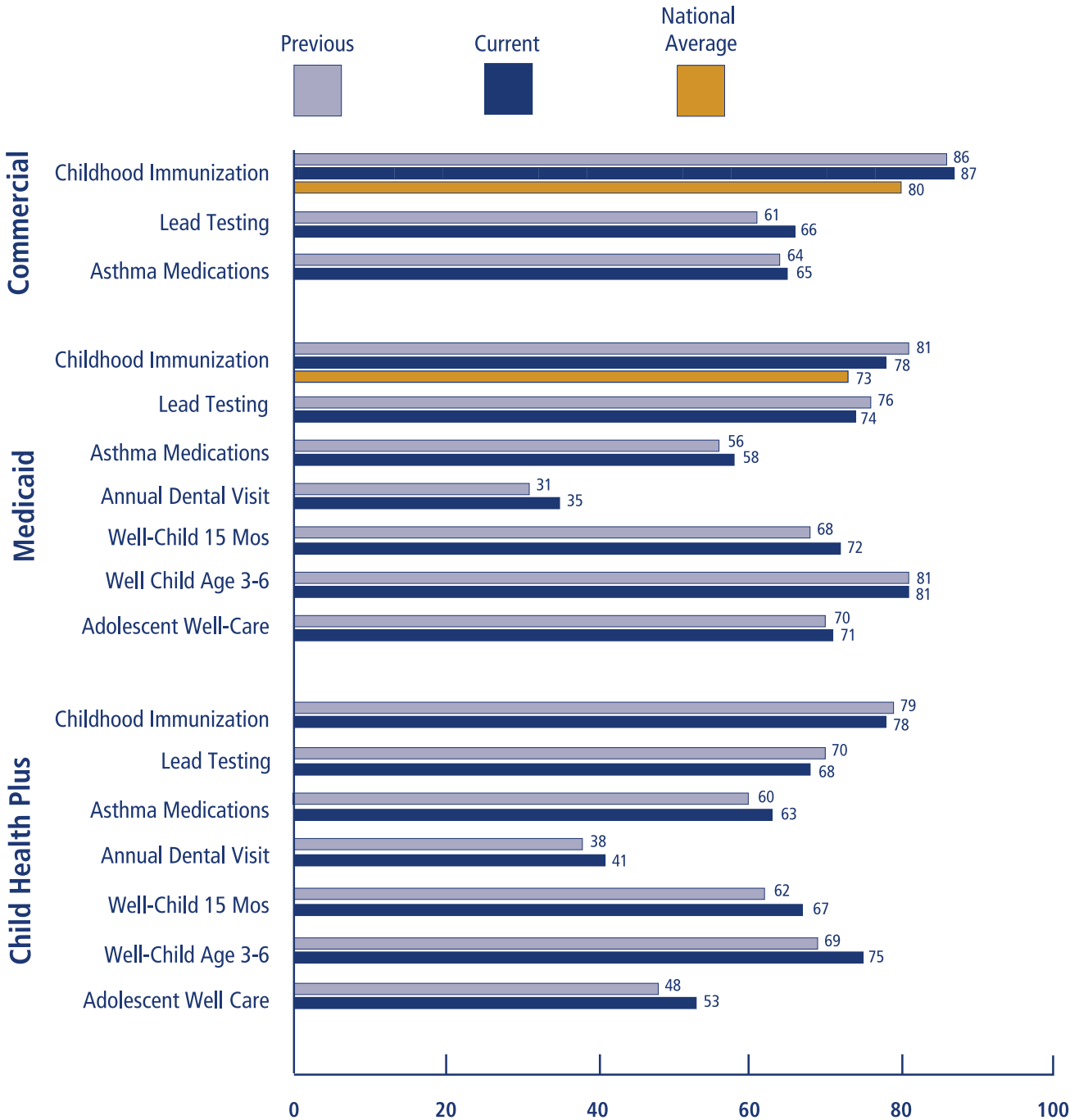
- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

# TRENDS AND BENCHMARKS

Section

4



## Looking for more information on children’s health services?

The following measures are published in the 2003 Report on Managed Care Performance-Supplement at the direct link:  
[http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2003/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2003/supplement_intro.htm)

- Frequency of Myringotomy Procedures - Children Ages 0-4 and 5-19
- Frequency of Tonsillectomy Procedures - Children Ages 0-9 and 10-19



MEASURE DESCRIPTIONS

Early detection of cervical cancer through a Pap test and breast cancer screening through a mammogram are crucial components of women’s primary and preventive health care.

Chlamydia is the most common sexually transmitted disease in the United States. Left undetected and untreated, chlamydia infection can lead to pelvic inflammatory disease, infertility, ectopic pregnancy, premature birth and low birthweight babies. As part of preventive care services, all sexually active women between the ages of 16 and 26 should be screened for chlamydia infection.

It is important for pregnant women to obtain early and regular prenatal care to increase the likelihood

of healthy outcomes for them and their babies. All new mothers need a check-up after delivery to ensure there are no complications.



Measure	Description (Type of Insurance)
Breast Cancer Screening	Women between the ages of 50-69 years who had a mammogram within the last two years. (C, M)
Cervical Cancer Screening	Women between the ages of 21 and 64 years who had a Pap test within the last three years. (C, M)
Chlamydia Screening	The percentage of sexually active young women who had at least one test for chlamydia. The measure is reported separately for ages 16-20 and 21-26. Medicaid percentages were calculated by the NYSDOH using data from the Medicaid Encounter Data System (MEDS). Since this is the first year that Medicaid rates are publicly reported, the percentages are presented in aggregate. (C, M)
Frequency of Ongoing Prenatal Care	The percentage of Medicaid-enrolled women who received 81 percent or more of the expected number of prenatal care visits, adjusted for gestational age and month the member enrolled in the health plan. (M)
Timeliness of Prenatal Care	The percentage of women who gave birth in the last year who had a prenatal care visit in their first trimester or within 42 days of enrollment in their health plan. (C, M)
Postpartum Care	The percentage of women who had a postpartum care visit between 21and 56 days after they gave birth. (C,M)

COMMERCIAL HEALTH PLAN PERFORMANCE

5

HEALTH PLAN	Breast Cancer Screening	Cervical Cancer Screening	Chlamydia Screening (Ages 16-20)	Chlamydia Screening (Ages 21-26)	Timeliness of Prenatal Care	Postpartum Care
Aetna	68▼	75▼	8▼	8▼	81▼	63▼
Blue Choice	80▲▲	85	39▲▲	32▲▲	95▲▲	85▲▲
BSNENY-HMO	80▲	84	26▼	30	94▲▲	85▲▲
CDPHP	76▲	84	23▼	23▼	93▲▲	81▲▲
Cigna	69▼	76▼	32	41▲▲	94▲	76
Community Blue	75▲	86▲	37▲▲	36▲▲	92	87▲▲
Empire	74	75▼	28▼	31	91	76
GHI HMO	69▼	81	27	19▼	92▲	76
Health Net	79▲	80	28▼	33▲▲	93▲	70
HIP	69▼	75▼	54▲▲	50▲▲	78▼	62▼
Independent Health	80▲	85▲▲	33▲▲	34▲▲	91▲	85▲▲
Managed Health, Inc.	76	72▼	—	—	—	—
MDNY	74	80	4▼	4▼	83▼	62▼
MVP	75	82	29▼	28▼	94▲▲	84▲▲
Oxford	74	84	27▼	33▲▲	87	66▼
Preferred Care	76	81	38▲▲	33▲	96▲▲	87▲▲
UnitedHealthCare of New York	73	77▼	16▼	17▼	75▼	61▼
Univera HealthCare	76	86	40▲▲	34▲▲	95▲	87▲▲
Upstate HMO	79▲▲	88▲▲	32	30	94▲▲	88▲▲
Vytra Health Plans	69▼	81	26▼	24▼	91	71
Statewide Average	74	81	31	30	88	74

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MEDICAID HEALTH PLAN PERFORMANCE

5

HEALTH PLAN	Breast Cancer Screening	Cervical Cancer Screening	Timeliness of Prenatal Care	Postpartum Care
ABC Health Plan	76	58▼	56▼	45▼
Affinity Health Plan	72▲	72	84▲▲	63
AmeriChoice	70	75	69▼	61
Blue Choice Option	67	77▲▲	84▲▲	61
BSNENY-HMO	—	74	84	66
Buffalo Community Health/PlusMed	64	76▲	72	59
CarePlus Health Plan	64	71	82▲	58▼
CDPHP	57▼	77▲	87▲	58▼
CenterCare	65	63▼	60▼	56▼
Community Blue	63	76▲	85▲▲	67
Community Choice	58	54▼	53▼	56
Community Premier Plus	71	82▲▲	87▲▲	63
Fidelis Care New York	61▼	73	81	68▲▲
Health Plus	72▲	70	87▲▲	67
HealthFirst	64	65▼	82▲	67
HealthSource/HHP	68	70	90▲	72▲
HIP	58▼	63▼	64▼	60
Independent Health/MediSource	64	79▲	88▲▲	62
MetroPlus	80▲▲	76▲	84▲▲	68▲▲
Neighborhood Health Providers	62	74	77	62
New York-Presbyterian CHP	68	77▲	84▲▲	71▲
Partners in Health	82▲▲	76▲▲	74	59
Preferred Care	63	79▲	87▲	58▼
Suffolk Health Plan	65	72	88▲▲	73▲
Total Care	66	75▲▲	73	68
UnitedHealthCare of New York	71	68	67▼	62
Vytra Health Plans	47▼	65▼	83▲▲	60
WellCare	45▼	52▼	52▼	55▼
Statewide Average	66	71	78	63

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.





Adults Living With Illness



MEASURE DESCRIPTIONS

This section provides information on how well managed care plans provide care to their members who are living with a chronic illness. Advising Smokers to Quit is a performance measure calculated from the CAHPS, which addresses if a health care provider advised against smoking within the last year. In addition, information is

provided on patients with hypertension (high blood pressure) who adequately controlled their blood pressure and for adults with persistent asthma who received appropriate medication to control their illness. This section contains six separate performance measures of Comprehensive Diabetes Care.

Measure	Description (Type of Insurance)
Controlling High Blood Pressure	The percent of members ages 46-85, who have hypertension and who have controlled their blood pressure (at or below 140/90). This is the first year that plans reported rates for their Medicaid members, therefore, plan-specific rates are not publicly reported. (C, M)
Use of Appropriate Medications for People with Asthma (18-56 Years)	Percent of members ages 18 to 56 years, with persistent asthma who received appropriate medications to control their condition. (C, M)
Advising Smokers to Quit	The percentage of members, 18 years and older, who are either current smokers or recent quitters, who received advice within the past two years by a health care provider to quit smoking. (C)
Comprehensive Diabetes Care	How well plan members who were diabetics received necessary components of diabetes care. (C, M)
1) HbA1c Testing	The percentage of diabetics who received a Hemoglobin H1c (HbA1c) test within the last year.
2) Poor HbA1c Control	The percentage of diabetics whose most recent HbA1c level indicated poor control (>9.5 percent). A low rate is desirable for this measure.
3) Dilated Eye Exam	The percentage of diabetics who had an eye screening exam over the last two years.
4) Lipid Profile	The percentage of diabetics who had a cholesterol test done over the last two years.
5) Lipids Controlled	The percentage of diabetics who had a cholesterol test done over the last two years and their most recent level of "bad cholesterol" was controlled (LDL-C130 mg/dL).
6) Nephropathy Screening	The percentage of diabetics who were screened for kidney damage.

Section

6

COMMERCIAL HEALTH PLAN PERFORMANCE

HEALTH PLAN	Comprehensive Diabetes Care		
	HbA1c Testing	Poor HbA1c Control	Dilated Eye Exam
Aetna	77▼	38▼	48▼
Blue Choice	90▲▲	23▲▲	69▲▲
BSNENY-HMO	88▲▲	24▲▲	61
CDPHP	88▲▲	22▲▲	66▲▲
Cigna	81	48▼	54
Community Blue	88▲▲	23▲▲	59
Empire	81	39▼	53
GHI HMO	83	44▼	45▼
Health Net	79▼	38▼	56
HIP	83	30	52
Independent Health	85	28	48▼
Managed Health, Inc.	—	—	—
MDNY	80	33	48▼
MVP	88▲▲	20▲▲	59
Oxford	80	37▼	57
Preferred Care	88▲▲	18▲▲	65▲▲
UnitedHealthCare of New York	75▼	50▼	45▼
Univera HealthCare	88▲▲	24▲▲	67▲
Upstate HMO	88▲▲	21▲	64▲
Vytra Health Plans	80	32	49▼
Statewide Average	83	31	56

LEGEND

▲▲

Significantly **better** than the statewide average in the current and previous reporting year

▲

Significantly **better** than statewide average in 2002

▼

Significantly **worse** than the statewide average in 2002

—

Sample size too small to report

NV

Plan submitted invalid data

NOTE:

Plans without symbols are not significantly different from the statewide average.

Section

6

COMMERCIAL HEALTH PLAN PERFORMANCE

HEALTH PLAN	Comprehensive Diabetes Care					
	HbA1c Testing	Poor HbA1c Control	Dilated Eye Exam	Lipid Profile	Lipids Controlled	Nephropathy Screening
Aetna	77▼	38▼	48▼	88	53▼	50▼
Blue Choice	90▲▲	23▲▲	69▲▲	87	62	65▲
BSNENY-HMO	88▲▲	24▲▲	61	91	64▲▲	55
CDPHP	88▲▲	22▲▲	66▲▲	93▲	64▲	60▲
Cigna	81	48▼	54	92	58	56
Community Blue	88▲▲	23▲▲	59	92	64▲	53
Empire	81	39▼	53	87	52▼	54
GHI HMO	83	44▼	45▼	91	62	48▼
Health Net	79▼	38▼	56	92	56	54
HIP	83	30	52	91	57	65▲▲
Independent Health	85	28	48▼	90	58	51
Managed Health, Inc.	—	—	—	—	—	—
MDNY	80	33	48▼	77▼	53▼	42▼
MVP	88▲▲	20▲▲	59	89	61	50▼
Oxford	80	37▼	57	91	57	51
Preferred Care	88▲▲	18▲▲	65▲▲	88	73▲▲	64▲
UnitedHealthCare of New York	75▼	50▼	45▼	86▼	42▼	45▼
Univera HealthCare	88▲▲	24▲▲	67▲	90	63	64▲
Upstate HMO	88▲▲	21▲	64▲	91	63▲	54
Vytra Health Plans	80	32	49▼	91	62	46▼
Statewide Average	83	31	56	90	58	55

LEGEND

▲▲

Significantly **better** than the statewide average in the current and previous reporting year

▲

Significantly **better** than statewide average in 2002

▼

Significantly **worse** than the statewide average in 2002

—

Sample size too small to report

NOTE:

Plans without symbols are not significantly different from the statewide average.



Use of Appropriate Medications for People with Asthma (18-56 yrs)		CONTROLLING HIGH BLOOD PRESSURE Medicaid Managed Care Plans 2002	
HEALTH PLAN			
ABC Health Plan	—	<p>Although the Department began collecting Controlling High Blood Pressure for commercial enrollees in 1999, this was the first year that plans were required to submit rates for this measure for Medicaid enrollees.</p> <p>Even though this measure was collected, reported and audited by the health plans, it has always been the policy of the Department to publicly report first-year measures on a summary level. This policy allows plans a year to become familiar with calculating the measure before rates are reported.</p>	
Affinity Health Plan	67		
AmeriChoice	67		
Blue Choice Option	71		
BSNENY-HMO	—		
Buffalo Community Health/PlusMed	78		
CarePlus Health Plan	67		
CDPHP	67		
CenterCare	70		
Community Blue	74▲▲		
Community Choice	NV		
Community Premier Plus	65		
Fidelis Care New York	71▲	Number of Medicaid Plans: 28	
Health Plus	72		
HealthFirst	69	Number of Plans with less than 30 eligible enrollees: 0	
HealthSource/HHP	63		
HIP	69	Statewide Medicaid Average: 59	
Independent Health/MediSource	74▲▲		
MetroPlus	71	Range of Scores: (47,72)	
Neighborhood Health Providers	63		
New York-Presbyterian CHP	67	Standard Deviation: 7	
Partners in Health	49▼		
Preferred Care	65	10th Percentile: 51	
Suffolk Health Plan	66	25th Percentile: 54	
Total Care	70	Median: 57	
UnitedHealthCare of New York	14▼	75th Percentile: 63	
Vytra Health Plans	62	90th Percentile: 68	
WellCare	49▼		
Statewide Average		68	

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.

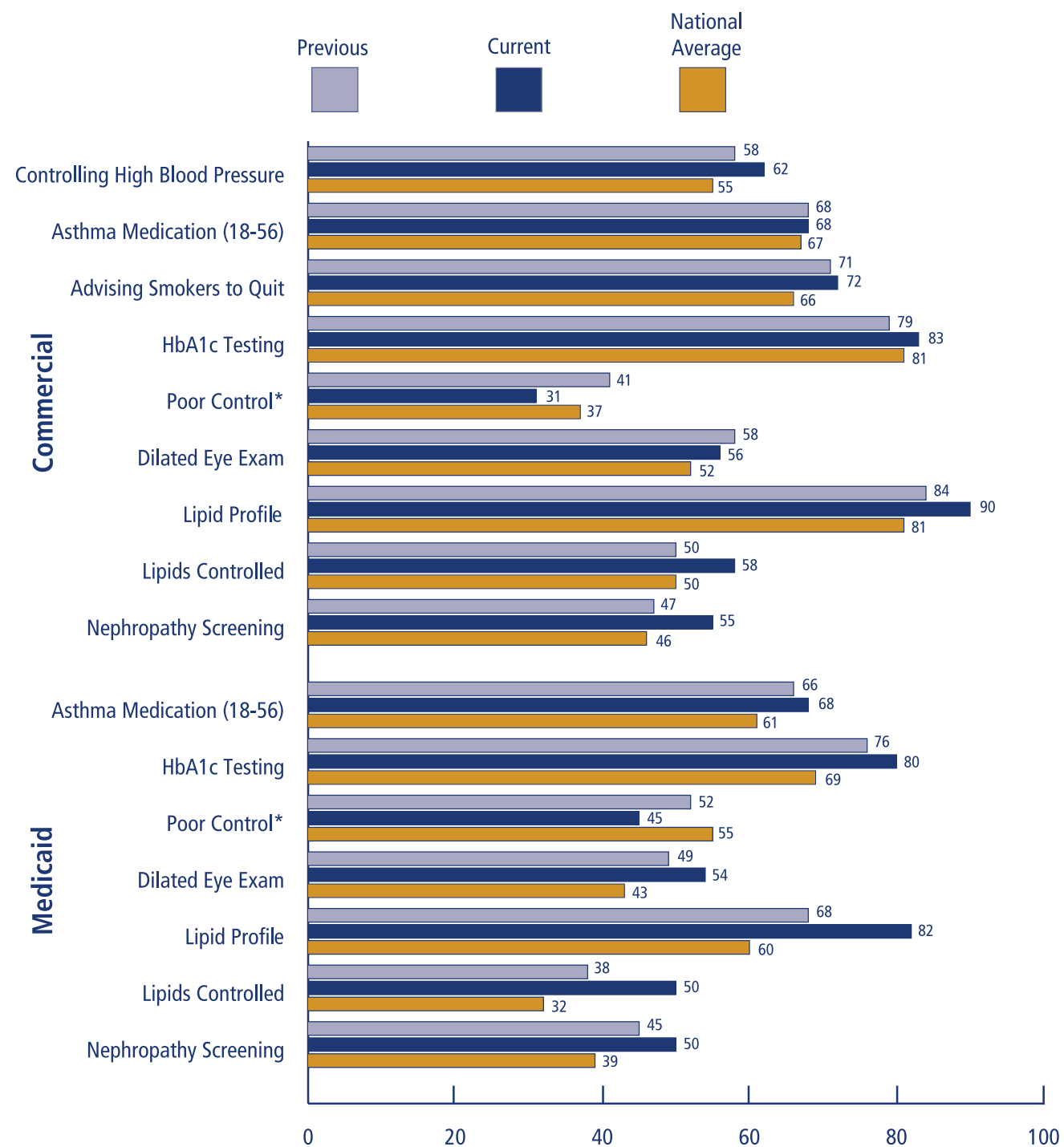
HEALTH PLAN	Comprehensive Diabetes Care					
	HbA1c Testing	Poor HbA1c Control*	Dilated Eye Exam	Lipid Profile	Lipids Controlled	Nephropathy Screening
ABC Health Plan	88	46	64	89	48	73▲
Affinity Health Plan	87▲▲	35▲▲	54	89▲▲	64▲▲	61▲▲
AmeriChoice	76	38▲	49▼	83	38▼	41▼
Blue Choice Option	85▲▲	35▲▲	59▲	79	49	64▲▲
BSNENY-HMO	91▲	23▲	62	90▲	62▲	52
Buffalo CHP/PlusMed	94▲	27▲	39▼	92▲	64▲	65▲
CarePlus Health Plan	76	46	49	78	41▼	65▲
CDPHP	87▲▲	33▲▲	61▲	84	51	48
CenterCare	78	58▼	51	74▼	44▼	27▼
Community Blue	84▲▲	35▲▲	52	88▲▲	55▲	57▲
Community Choice	55▼	67▼	44▼	50▼	23▼	32▼
Community Premier Plus	73▼	55▼	70▲▲	83	50	49
Fidelis Care New York	78	54▼	49▼	80	47	39▼
Health Plus	83	37▲	88▲▲	88▲▲	55	52
HealthFirst	80	68▼	38▼	84	45	45▼
HealthSource/HHP	81	56▼	47▼	71▼	31▼	29▼
HIP	76	37▲▲	50	85	56▲▲	51
Indep. Health/MediSource	80	42	48▼	86▲	54	54
MetroPlus	86▲▲	35▲▲	68▲▲	91▲▲	66▲▲	57▲▲
Neighborhood Hlth Prov	69▼	58▼	48▼	70▼	35▼	52
NY-Presbyterian CHP	80	33▲	63▲	82	61▲	55
Partners in Health	80	46	51	90▲	64▲▲	65▲
Preferred Care	83	34▲	49	79	61▲	57▲
Suffolk Health Plan	83	70▼	61▲	80	25▼	69▲▲
Total Care	90▲▲	42	60	75▼	46	54
UnitedHC of New York	82	50	35▼	82	39▼	52
Vytra Health Plans	80	42	51	83	50	52
WellCare	61▼	69▼	41▼	59▼	27▼	22▼
Statewide Average		80	45	54	82	50

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

\*A low rate is desirable for this measure.

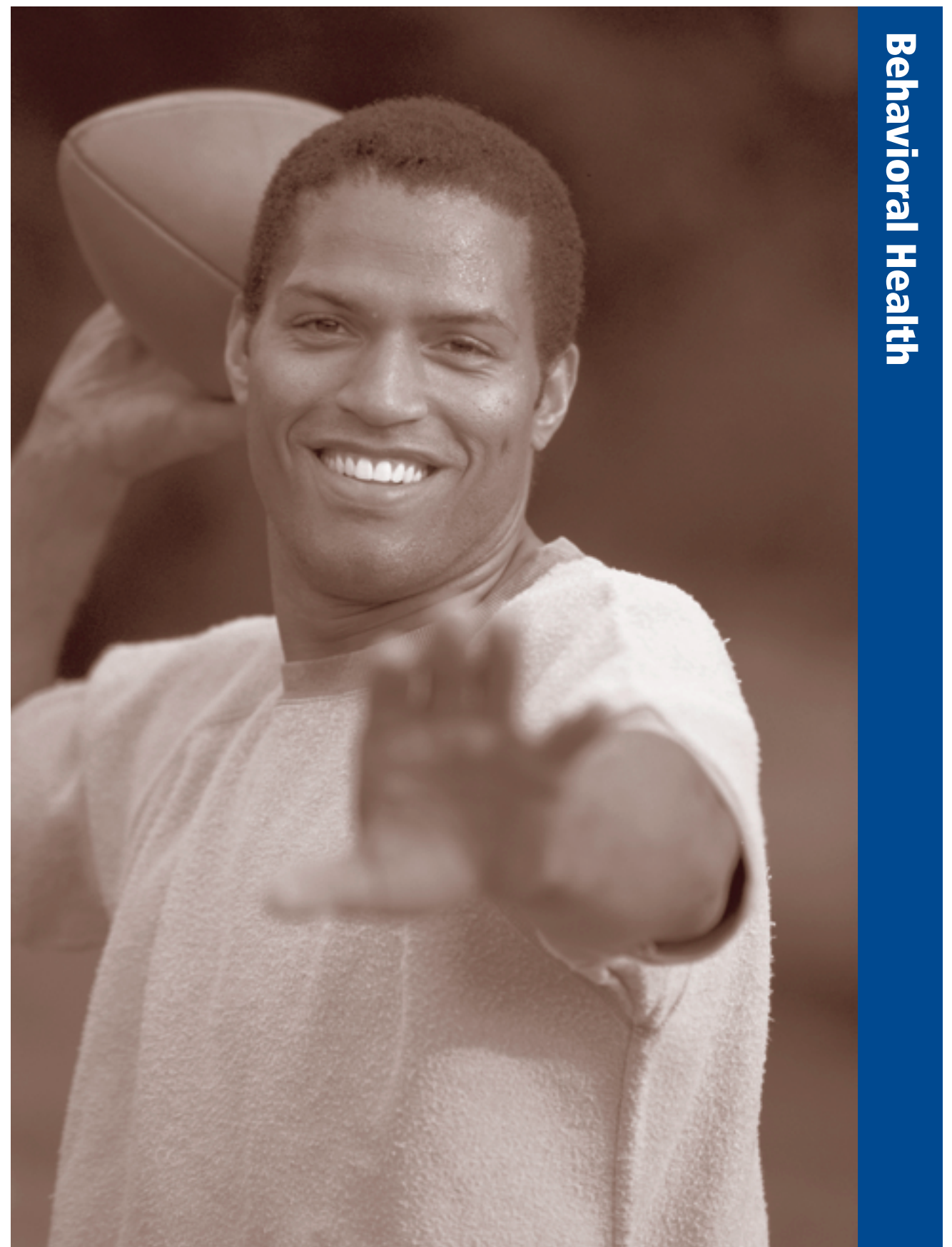


\* A low rate is desirable for this measure.

### Looking for more information on adult health services?

The following measures are published in the 2003 Report on Managed Care Performance-Supplement at the direct link [http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2003/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2003/supplement_intro.htm):

Frequency of Angioplasty, Frequency of Cardiac Catheterization, Frequency of Coronary Artery Bypass Grafts, Frequency of Laproscopic Cholecystectomy Frequency of Laminectomy/Discectomy, Frequency of Prostatectomy



MEASURE DESCRIPTIONS

This section has two performance measures. The first measure addresses how well a health plan is performing in treating people with moderate to severe depression who are prescribed antidepressant medication. Once identified, people who suffer from depression and are treated with medication should be managed on both a short term (acute phase) and long-term (continuation phase) basis. After antidepressant medication therapy has been initiated, a person should be

seen for at least three follow-up visits to make sure their medication is adequately alleviating their symptoms and side-effects are minimal. By continuing treatment with their provider, patients with depressive disorders may prevent a relapse in symptoms and/or prevent future recurrences of depression. The second measure addresses two time periods of ambulatory follow-up care for enrollees who were hospitalized for treatment of selected mental health disorders.

Measure	Description (Type of Insurance)
Antidepressant Medication Management	This measure is for members ages 18 years and older and has three components of care. (C, M)
	1) Optimal Practitioner Contacts The percentage of members ages 18 years and older, who were diagnosed with depression and treated with an antidepressant medication, and who had at least three follow up contacts with a primary care or mental health provider during the 12-week acute treatment phase.
	2) Effective Acute Phase Treatment The percentage of members ages 18 years and older, who were diagnosed with depression and treated with an antidepressant medication, and who remained on medication during the entire 12-week acute treatment phase.
	3) Effective Continuation Phase Treatment The percentage of members ages 18 years and older, who were diagnosed with depression and treated with an antidepressant medication, and who remained on medication for at least six months.
Ambulatory Follow-Up After Hospitalization for Mental Illness	This measure is for members ages 6 years and older and has two time-frame components. (C, M)
	1) Within 7 Days The percentage of members who were hospitalized for treatment for selected mental health disorders (such as depression or bipolar disorder) and were seen on an ambulatory basis or who were in day/night treatment with a mental health provider within 7 days of discharge.
	2) Within 30 Days The percentage of members who were hospitalized for treatment for selected mental health disorders (such as depression or bipolar disorder) and were seen on an ambulatory basis or who were in day/night treatment with a mental health provider within 30 days of discharge.

COMMERCIAL HEALTH PLAN PERFORMANCE

7

HEALTH PLAN	Antidepressant Medication Management			Ambulatory Follow-Up After Hospitalization for Mental Illness	
	Optimal Practitioner Contacts	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
Aetna	32▲▲	54▼	39▼	60	76
Blue Choice	13▼	65▲▲	49▲▲	90▲▲	93▲▲
BSNENY-HMO	14▼	59	42	54	71
CDPHP	24	61	43	52▼	76
Cigna	32▲▲	56	37	48▼	63▼
Community Blue	13▼	63	46	50▼	71▼
Empire	20▼	55▼	38▼	65	83▲
GHI HMO	14▼	60	44	56	70
Health Net	30▲▲	60	46	53▼	70▼
HIP	42▲▲	58	31▼	65▲▲	84▲▲
Independent Health	12▼	57▼	40▼	59	71▼
Managed Health, Inc.	—	—	—	—	—
MDNY	23	64	49	73▲	82
MVP	24	59	43	64	77
Oxford	31▲▲	61	46	58▼	70▼
Preferred Care	15▼	71▲▲	53▲▲	75▲	83
UnitedHealthCare of New York	35▲	60	46	38▼	51▼
Univera HealthCare	43▲▲	62	49	61	80
Upstate HMO	14▼	62	46	77▲▲	83▲
Vytra Health Plans	38▲▲	56	40	60	77
Statewide Average	23	61	44	62	77

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

MEDICAID HEALTH PLAN PERFORMANCE

7

HEALTH PLAN	Antidepressant Medication Management			Ambulatory Follow-Up After Hospitalization for Mental Illness	
	Optimal Practitioner Contacts	Effective Acute Phase Treatment	Effective Continuation Phase Treatment	Within 7 Days	Within 30 Days
ABC Health Plan	—	—	—	—	—
Affinity Health Plan	30	38▼	25	38▼	52▼
AmeriChoice	53▲▲	48	47▲	63▲	77▲▲
Blue Choice Option	28	51	34	71▲▲	79▲
BSNENY-HMO	—	—	—	—	—
Buffalo Community Health/PlusMed	—	—	—	—	—
CarePlus Health Plan	—	—	—	25▼	46▼
CDPHP	25	53	27	36▼	55▼
CenterCare	—	—	—	46	64
Community Blue	18▼	51	40	42	57
Community Choice	—	—	—	NV	NV
Community Premier Plus	—	—	—	—	—
Fidelis Care New York	30	41	28	43	63
Health Plus	56▲▲	61▲	45▲▲	50	80▲
HealthFirst	42▲	37▼	26	51	67
HealthSource/HHP	—	—	—	73▲▲	88▲▲
HIP	40	47	28	60▲▲	81▲▲
Independent Health/MediSource	11▼	40	27	58▲▲	67
MetroPlus	37	49	36	NV	NV
Neighborhood Health Providers	20	34	27	36	60
New York-Presbyterian CHP	—	—	—	25▼	42▼
Partners in Health	69▲▲	47	28	34▼	66
Preferred Care	25	43	32	38	47▼
Suffolk Health Plan	—	—	—	27▼	57
Total Care	17▼	54	38	80▲	87▲
UnitedHealthCare of New York	—	—	—	31▼	46▼
Vytra Health Plans	—	—	—	48	58
WellCare	12▼	36	15▼	38	56
Statewide Average	31	46	32	48	65

LEGEND

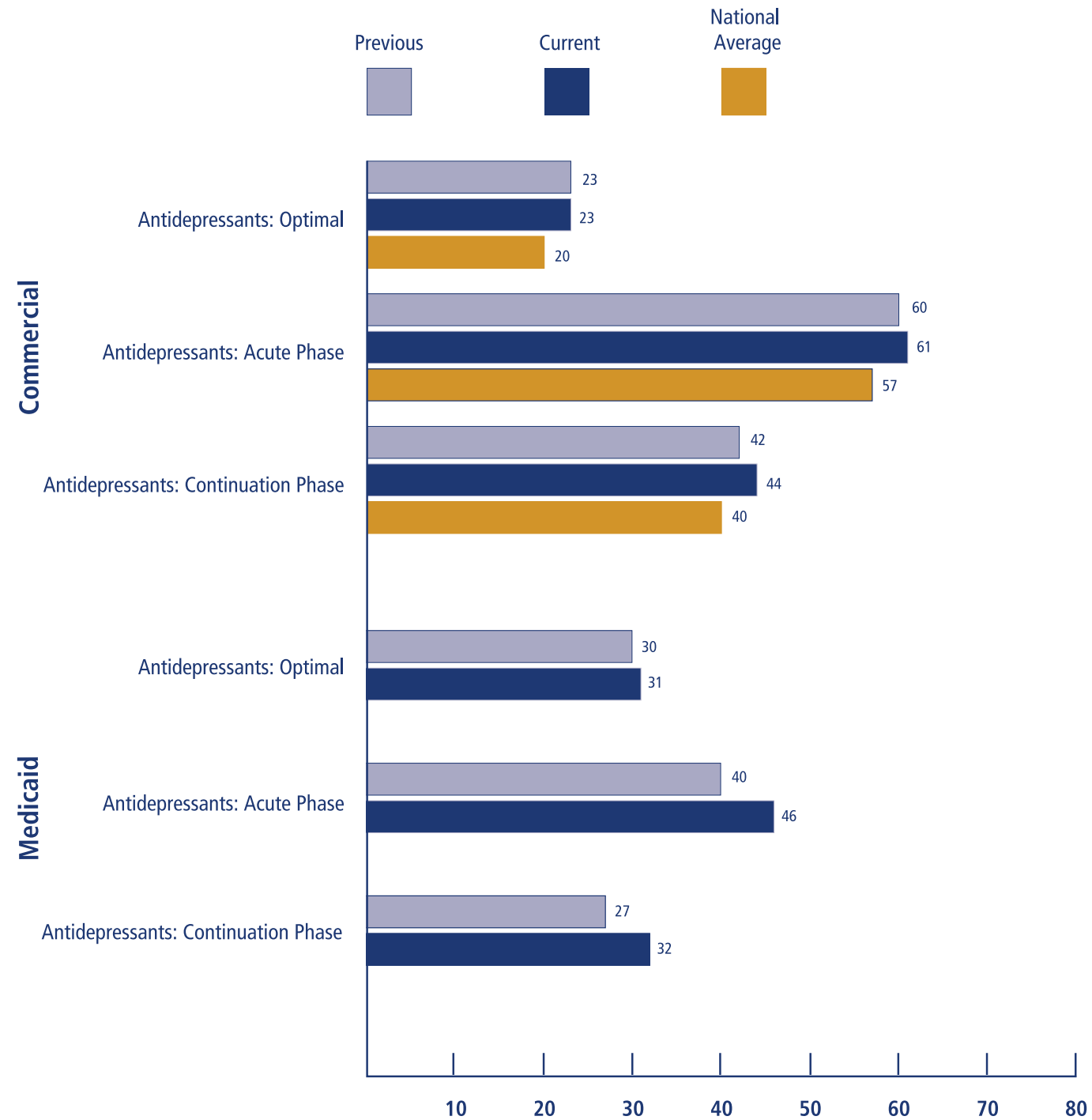
- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report
- NV Plan submitted invalid data

NOTE: Plans without symbols are not significantly different from the statewide average.



## TRENDS AND BENCHMARKS

### Section 7



### Looking for more information on behavioral health services?

The following measures are published in the 2003 Report on Managed Care Performance-Supplement at the direct link: [http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2002/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2002/supplement_intro.htm)

Inpatient Chemical Dependency Services for Men and Women  
Inpatient Mental Health Services for Men and Women

## SECTION

### 8

## Access and Service



MEASURE DESCRIPTIONS

Access to care means that care is available, that enrollees know of its availability, that they know how to obtain health care services when they need them, and they use them. The first two measures are the percentage of enrollees who had a visit with primary care provider. The other questions are from the CAHPS survey conducted during 2002.

The Department sponsors a consumer satisfaction survey for Medicaid enrollees every two years. The most recent data is from 2001 and is published in the 2002 New York State Managed Care Plan Performance Report. Copies are available by calling the Department at (518)486-6074 or visiting the Department’s website at [www.health.state.ny.us](http://www.health.state.ny.us) and looking under “Information for Consumers”.

Measure	Description (Type of Insurance)
Children’s Access to Primary Care Practitioners	The percent of children who had a visit with a primary care practitioner within the last year (Age 12 mos.-6 yrs) or within the last two years (7-11 yrs). The measure has been divided into three age groups: 12-24 months, 25 months-6 years and 7-11 years. (C, M, CHP)
Adult Access to Preventive Care Services	The percent of adults ages 20-65 years who had an ambulatory or preventive care visit within the last year if they are insured by Medicaid, or within the last three years if they are commercially insured. The measure has been divided into three age groups: 20-44, 45-64 and 65 and older. (C, M)
Problem Getting Care Needed	The percent of adults responding “small problem” or “big problem” when asked how much of a problem, if any, they experienced getting care needed. A low rate is desirable for this measure. Please note that NYSDOH calculates rates for this question differently than NCQA; therefore rates may differ from other publications of this information. (C)
Problem with Service	The percent of adults responding “small problem” or “big problem” when asked how much of a problem, if any, did they experience with their health plan’s service. A low rate is desirable for this measure. Please note that NYSDOH calculates rates for this question differently than NCQA; therefore rates may differ from other publications of this information. (C)
Received Services Quickly	The percent of adults responding “usually” or “always” when asked if, in the last 12 months, they received health plan services quickly. (C)
Overall Rating of Health Plan	The percent of adults responding 8, 9 or 10 on a scale of 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible. (C)
Called or Written Health Plan with Complaints	The percent of adults who responded “yes” when asked if over the last 12 months, they called or wrote their health plan with a complaint or problem. A low rate is desirable for this measure. (C)
Complaints Resolved to Satisfaction	The percent of adults who responded “yes” when asked if their complaint or problem was settled to their satisfaction. (C)

Section

COMMERCIAL HEALTH PLAN PERFORMANCE

8

HEALTH PLAN	Children's Access to Primary Care Providers			Adult Access to Preventive/Ambulatory Health		
	12-24 Months	25 Months-6 Years	7-11 Years	20-44 Years	45-64 Years	65+ Years
Aetna	93▼	83▼	83▼	90▼	91▼	92▼
Blue Choice	99▲▲	97▲▲	97▲▲	93▲▲	95▲▲	98▲▲
BSNENY-HMO	99▲▲	96▲▲	94▲▲	94▲▲	95▲▲	97▲
CDPHP	99▲▲	97▲▲	97▲▲	96▲▲	96▲▲	98▲▲
Cigna	94▼	89▼	88▼	91▼	91▼	93▼
Community Blue	99▲▲	94▲▲	94▲▲	94▲▲	95▲▲	97▲▲
Empire	97▲	93▲▲	93	91▼	93	96▲▲
GHI HMO	92▼	89▼	92	92	93	95
Health Net	96	91	92	94▲▲	94	95
HIP	90▼	83▼	86▼	90▼	89▼	84▼
Independent Health	98▲▲	95▲▲	95▲▲	94▲▲	95▲▲	97▲▲
Managed Health, Inc.	—	—	—	92	96	—
MDNY	97	96▲▲	96▲▲	95▲▲	95▲▲	96
MVP	98▲▲	94▲▲	95▲▲	95▲▲	95▲▲	97▲▲
Oxford	97▲▲	94▲▲	95▲▲	94▲	95▲▲	96▲▲
Preferred Care	99▲▲	95▲▲	95▲▲	95▲▲	96▲▲	97▲▲
UnitedHealthCare of New York	92▼	89▼	91	89▼	93	95
Univera HealthCare	96	91▼	93▲	93▲▲	95▲▲	98▲▲
Upstate HMO	94▼	90▼	93	94▲▲	96▲▲	97▲▲
Vytra Health Plans	98▲▲	97▲▲	97▲▲	95▲▲	95▲▲	96▲▲
Statewide Average	96	92	92	93	94	95

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

Section

COMMERCIAL HEALTH PLAN PERFORMANCE

8

HEALTH PLAN	Problem Getting Care Needed*	Problem With Service*	Received Services Quickly	Overall Rating of Health Plan	Called or Written Health Plan with Complaints*	Complaints Resolved to Satisfaction
Aetna	33▼	38	74	60	15	72
Blue Choice	20▲▲	32	87▲▲	69▲▲	8▲▲	81
BSNENY-HMO	23	35	85▲▲	67	17	84
CDPHP	17▲▲	23▲▲	82▲▲	83▲▲	10▲▲	81
Cigna	36▼	39	65▼	49▼	20	78
Community Blue	23	37	81▲▲	64	14	84
Empire	26	37	76	64	21▼	88
GHI HMO	35▼	43▼	77	47▼	29▼	78
Health Net	32▼	43▼	75▼	65	21▼	71
HIP	31▼	40	66▼	60	10▲	93▲
Independent Health	20▲▲	27▲▲	83▲▲	66	11▲▲	76
Managed Health, Inc.	—	—	—	—	—	—
MDNY	28	35	73▼	50▼	18	73
MVP	18▲▲	28▲▲	84▲▲	73▲▲	16	90▲▲
Oxford	28	33	75	62	12▲	72
Preferred Care	19▲▲	27▲▲	86▲▲	71▲▲	11▲▲	81
UnitedHealthCare of New York	31	40	74▼	61	26▼	81
Univera HealthCare	22	36	81	64	13▲▲	74
Upstate HMO	22	44▼	81▲▲	67	22▼	91▲
Vytra Health Plans	23▲	31	76	68	16	85
Statewide Average	25	35	79	65	16	81

LEGEND

- ▲▲ Significantly **better** than the statewide average in the current and previous reporting year
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

\*A low rate is desirable for this measure.

Section

8

MEDICAID HEALTH PLAN PERFORMANCE

HEALTH PLAN	Children's Access to Primary Care Providers			Adult Access to Preventive/Ambulatory Health		
	12-24 Months	25 Months-6 Years	7-11 Years	20-44 Years	45-64 Years	65+ Years
ABC Health Plan	81	61▼	77▼	59▼	71▼	—
Affinity Health Plan	81▼	72▼	82▼	74▼	84	74▼
AmeriChoice	90▲▲	86▲▲	86▲	75	83▼	76▼
Blue Choice Option	98▲▲	89▲▲	89▲▲	83▲▲	90▲▲	—
BSNENY-HMO	91	91▲▲	91▲	88▲▲	91▲	—
Buffalo Comm Health/PlusMed	95▲▲	88▲▲	88▲▲	81▲▲	80	—
CarePlus Health Plan	84▼	79▼	81▼	70▼	76▼	87
CDPHP	98▲▲	92▲▲	92▲▲	89▲▲	93▲▲	91
CenterCare	75▼	69▼	78▼	67▼	81▼	83
Community Blue	95▲▲	89▲▲	89▲▲	86▲▲	91▲▲	—
Community Choice	68▼	65▼	60▼	69▼	83	—
Community Premier Plus	89	83▲▲	90▲▲	75	86	71▼
Fidelis Care New York	90▲▲	82▲	83▼	75▼	81▼	78
Health Plus	89▲▲	81	88▲▲	70▼	81▼	76▼
HealthFirst	81▼	80	86▲▲	73▼	83▼	78▼
HealthSource/HHP	85	76▼	65▼	74	83	86
HIP	86▼	85▲▲	91▲▲	78▲	85▲	88▲▲
Independent Health/MediSource	99▲▲	91▲▲	90▲▲	88▲▲	93▲▲	—
MetroPlus	75▼	71▼	83▼	63▼	83▼	85
Neighborhood Health Providers	85▼	80▼	85	68▼	76▼	77
New York-Presbyterian CHP	88	83▲▲	90▲	67▼	79▼	73
Partners in Health	70▼	72▼	83	76	86	79
Preferred Care	98▲▲	88▲▲	84	83▲▲	89▲▲	—
Suffolk Health Plan	91▲	80	80▼	76	89▲▲	93▲▲
Total Care	96▲▲	88▲▲	87▲	86▲▲	91▲▲	—
UnitedHealthCare of New York	93▲▲	87▲▲	90▲▲	81▲▲	85	79
Vytra Health Plans	95▲▲	92▲▲	96▲▲	88▲▲	93▲▲	—
WellCare	87	79	80▼	69▼	77▼	64▼
Statewide Average	87	81	85	76	84	82

LEGEND

- ▲▲ Significantly **better** than the statewide average in 2001 and 2002
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

NOTE: Plans without symbols are not significantly different from the statewide average.

Section

8

CHILD HEALTH PLUS PLAN PERFORMANCE

HEALTH PLAN	Children's Access to Primary Care Providers		
	12-24 Months	25 Months-6 Years	7-11 Years
ABC Health Plan	65 ▼	43 ▼	68 ▼
Affinity Health Plan	60 ▼	62 ▼	77 ▼
AmeriChoice	95 ▲	98 ▲	—
Blue Choice	100 ▲▲	96 ▲▲	98 ▲▲
BSNENY-HMO	95 ▲▲	96 ▲▲	97 ▲▲
Buffalo Community Health	—	95 ▲▲	94 ▲▲
CarePlus Health Plan	83	83 ▼	83 ▼
CDPHP	100 ▲▲	97 ▲▲	97 ▲▲
CenterCare	70 ▼	70 ▼	77 ▼
Community Blue	99 ▲▲	95 ▲▲	95 ▲▲
Community Choice	66 ▼	68 ▼	69 ▼
Community Premier Plus	64 ▼	78 ▼	84
Empire	99 ▲▲	97 ▲▲	98 ▲▲
Fidelis Care New York	78 ▼	78 ▼	80 ▼
GHI	—	76 ▼	85
Health Plus	84	81 ▼	86 ▼
HealthFirst	75 ▼	76 ▼	80 ▼
HealthSource/HHP	87	82 ▼	72 ▼
HIP	95 ▲▲	92 ▲▲	95 ▲▲
MetroPlus	69 ▼	67 ▼	75 ▼
Neighborhood Health Providers	69 ▼	79 ▼	82 ▼
New York-Presbyterian CHP	84	84	96 ▲
Suffolk Health Plan	—	68 ▼	76 ▼
Total Care	—	93 ▲▲	96 ▲▲
UnitedHealthCare of New York	97 ▲▲	95 ▲▲	96 ▲▲
Upstate HMO	98 ▲▲	95 ▲▲	97 ▲▲
WellCare	76 ▼	61 ▼	74 ▼
Statewide Average	85	85	89

LEGEND

- ▲▲ Significantly **better** than the statewide average in 2001 and 2002
- ▲ Significantly **better** than statewide average in 2002
- ▼ Significantly **worse** than the statewide average in 2002
- Sample size too small to report

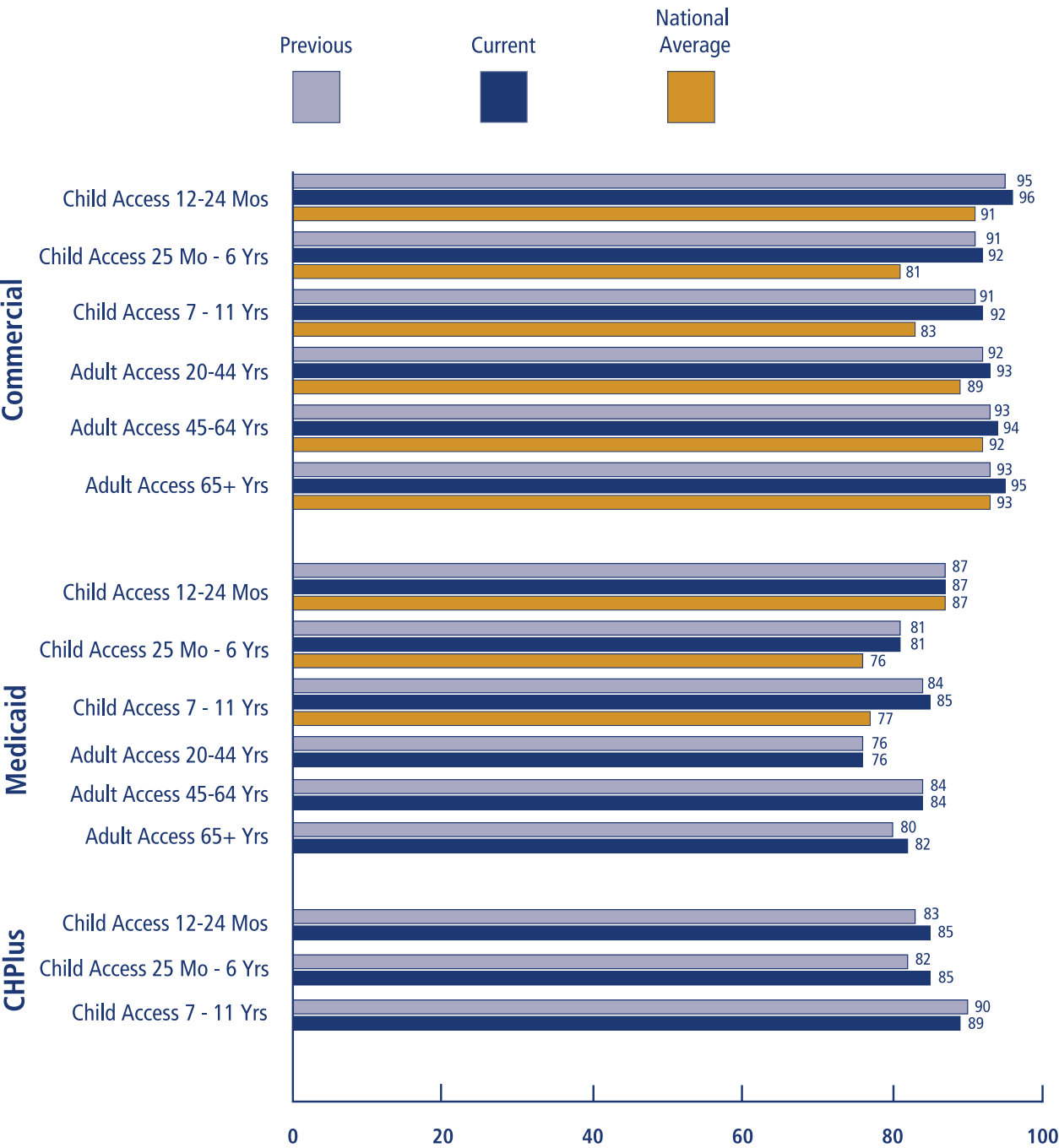
NOTE: Plans without symbols are not significantly different from the statewide average.



Section 8

TRENDS AND BENCHMARKS - ACCESS

Please note that there are differences in continuous enrollment specifications and visit timeframes between the age cohorts and payers. Specifics may be found in the Measure Description table on page 53 of this Report.



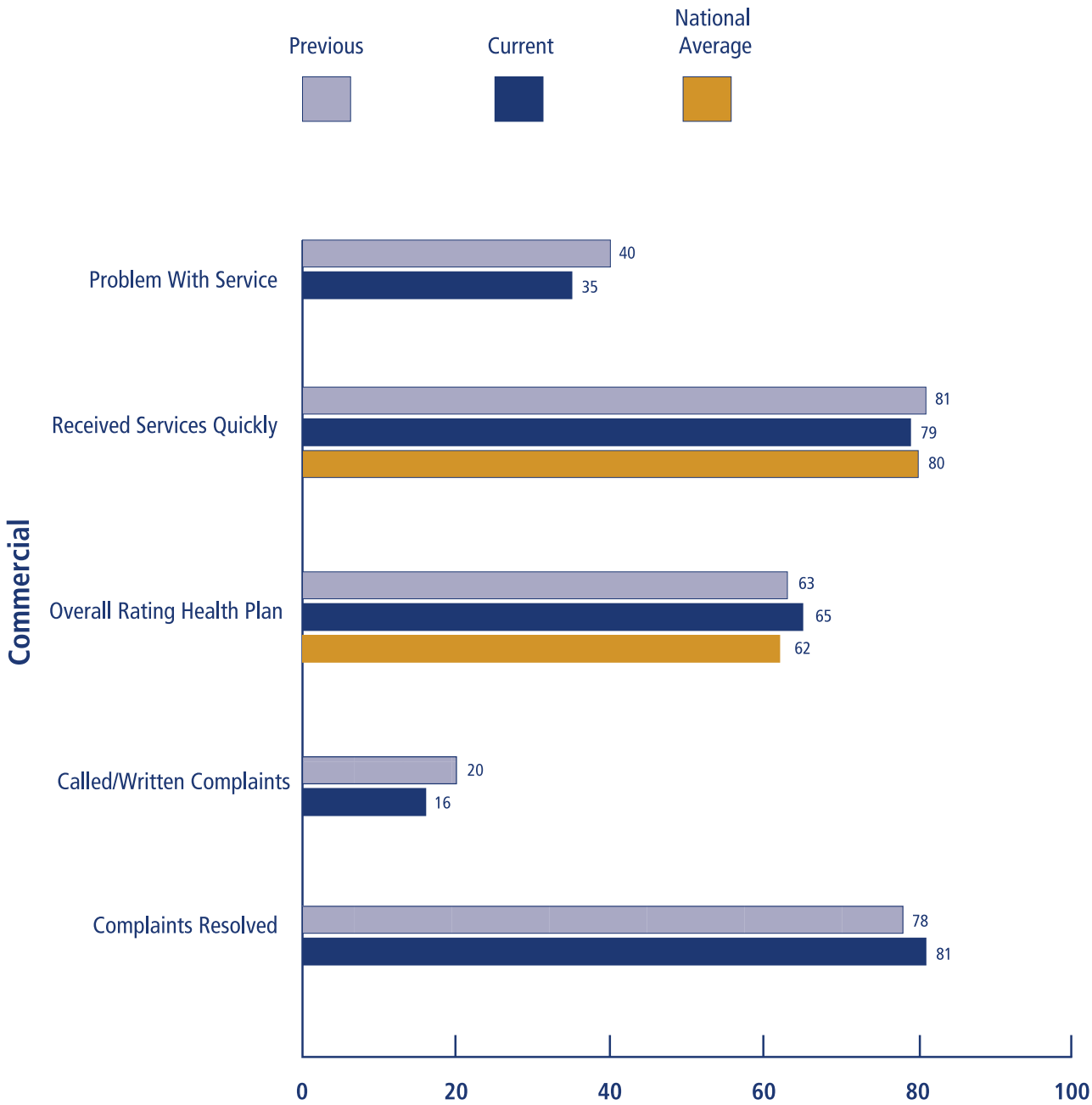
Looking for more information on access to health services?

The following measures are published in the 2003 Report on Managed Care Performance-Supplement at the direct link:  
[http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr\\_2003/supplement\\_intro.htm](http://www.health.state.ny.us/nysdoh/mancare/qarrfull/qarr_2003/supplement_intro.htm)

- Outpatient Use of Services: Outpatient Visits, Emergency Room Visits & Ambulatory Surgery Encounters
- Inpatient Use of Services - Medicine, Surgery and Maternity: Total Days, Discharges and Average Length of Stay

Section 8

TRENDS AND BENCHMARKS - SERVICE



\* A low rate is desirable for this measure.

## Regional Rates by Performance Measure



REGIONAL RATES BY PERFORMANCE MEASURE

9

Performance Measure		COMMERCIAL							MEDICAID						
		LI	HV	NE	CEN	WST	Total ROS	NYC	LI	HV	NE	CEN	WST	Total ROS	NYC
PROVIDER NETWORK	Board Cert: Primary Care	86	86	85	89	84	86	85	87	81	81	88	85	85	82
	Board Cert: OB/GYN	78	78	81	81	82	79	75	79	72	82	81	81	79	70
	Board Cert: Pediatric Specialists	82	83	75	78	75	81	82	84	82	76	87	82	83	82
	Provider Communication	92	92	94	93	93	93	86							
	Personal Doctor or Nurse	75	75	79	82	77	77	70							
	Satisfaction with Specialist	75	80	83	86	81	80	80							
CHILD AND ADOLESCENT CARE	Childhood Immunization	83	84	92	90	94	89	83	78	79	91	83	89	84	75
	Lead Testing	61	64	66	69	71	67	66	72	74	70	72	77	74	74
	Well-Child First 15 Mos. (5+ Visits)								75	78	88	75	79	79	67
	Well-Child Age 3-6 Years								86	87	85	81	83	84	80
	Adolescent Well-Care								74	76	79	75	76	76	69
	Asthma Medications (5-17)	63	65	72	72	67	67	61	60	55	59	57	61	59	58
	Annual Dental Visit								34	40	45	45	45	39	34
WOMEN'S HEALTH	Breast Cancer Screening	72	73	76	76	78	75	71	63	63	61	65	64	63	67
	Cervical Cancer Screening	79	80	83	84	85	82	79	68	67	75	73	77	73	70
	Chlamydia Screen (16-20)	26	25	25	29	37	31	31	18	35	40	49	56	47	32
	Chlamydia Screen (21-26)	28	27	26	28	34	30	31	24	29	46	46	57	47	34
	Frequency of Ongoing PNC								53	53	74	57	57	58	51
	Timeliness of Prenatal Care	86	88	93	93	93	90	84	78	77	84	75	84	80	76
	Postpartum Care	67	70	82	84	86	76	65	65	65	60	65	63	64	63
ADULTS LIVING WITH ILLNESS	Controlling High Blood Pressure	57	59	66	67	64	62	60	59	56	64	56	59	58	59
	Advising Smokers to Quit	69	71	73	72	74	72	68							
	Asthma Medications (18-56)	66	68	72	70	71	69	65	66	65	67	68	72	69	67
	Diabetes Care: HbA1c Testing	80	81	87	87	88	85	80	81	76	85	83	83	82	79
	Diabetes Care: Poorly Controlled	36	35	23	22	24	29	36	52	53	35	47	39	44	46
	Diabetes Care: Dilated Eye Exam	52	54	62	60	62	58	53	48	48	59	49	52	51	56
	Diabetes Care: Lipid Profile	89	90	92	90	90	90	90	84	73	83	80	83	81	83
	Diabetes Care: Lipids Controlled	56	56	63	61	62	60	56	46	40	51	45	53	48	51
	Diabetes Care: Nephropathy Screen	52	52	56	52	59	55	56	53	38	47	49	56	50	50
BEHAVIORAL HEALTH	Antidepressants: Optimal Contacts	31	28	22	21	15	21	33	41	32	24	23	21	24	40
	Antidepressants: Acute Phase	59	59	60	60	63	61	58	42	42	52	50	46	47	46
	Antidepressants: Continuation Phase	42	43	43	44	47	45	40	34	27	27	32	32	31	33
	Ambulatory Follow-Up 7 Days	60	59	58	68	68	63	60	42	58	38	52	55	51	45
	Ambulatory Follow-Up 30 Days	76	74	76	79	80	77	76	60	74	55	66	66	65	65
ACCESS AND SERVICE	Child Access: 12-24 Mos	96	96	98	97	99	97	95	89	84	97	94	96	93	84
	Child Access: 25 Mos - 6 Yrs	91	91	96	93	95	93	89	82	76	90	86	88	85	79
	Child Access: 7-11 Yrs	91	91	96	94	95	94	89	86	72	91	87	88	85	85
	Adult Access: 20-44 Yrs	92	93	95	94	94	93	91	78	73	87	82	83	81	72
	Adult Access: 45-64 Yrs	93	93	96	95	95	95	92	86	82	91	87	89	87	82
	Adult Access: 65+	93	95	98	97	98	96	91	86	80	86	83	83	84	82
	Problem Getting Care Needed	26	28	21	21	20	23	33							
	Problem With Service	35	36	31	40	31	33	40							
	Received Services Quickly	75	79	83	79	84	81	60							
	Overall Rating Health Plan	62	63	72	70	67	67	55							
	Called/Written with Complaints	18	22	15	18	12	16	16							

ROS=Rest of State: the counties of NYS excluding New York City  
Note: Please refer to the Health Plan Profiles section of this report for a full description of regional areas of New York State.

REGIONAL RATES BY PERFORMANCE MEASURE

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Performance Measure		CHILD HEALTH PLUS						
		LI	HV	NE	CEN	WST	Total ROS	NYC
CHILD AND ADOLESCENT CARE	Childhood Immunization	77	79	90	86	90	83	75
	Lead Testing	65	70	67	68	70	68	69
	Well-Child First 15 Mos. (5+ Visits)	65	66	86	78	79	72	62
	Well-Child Age 3-6 Years	73	74	77	72	79	75	75
	Adolescent Well-Care	51	50	53	47	54	51	54
	Asthma Medications (5-17))	64	63	70	67	70	66	59
	Annual Dental Visit	42	47	44	40	52	45	37
ACCESS AND SERVICE	Child Access: 12-24 Mos	88	87	96	96	97	91	81
	Child Access: 25 Mos - 6 Yrs	88	85	94	94	94	90	80
	Child Access: 7-11 Yrs	92	85	96	96	96	92	86

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If you have a problem with your health plan, call:  
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1-800-206-8125

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